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## FEC FORM 2

#### STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)									
	Mr. CARLOS CURBELO (b) Address (number and street)	☐ Check if address changed			2. Candidate's FEC Identification Number					
	8770 SUNSET DRIVE #355			H4FL26038						
	(c) City, State, and ZIP Code			3. Is This	Nev		~	nded		
	MIAMI Party Affiliation	5. Office Soug	FL	. 33173		Stateme trict of Candida	. ,	OR	(A)	
4.	REPUBLICAN PARTY	House	TIL		FL	26	ale			
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
(a) Name of Committee (in full) CARLOS CURBELO CONGRESS										
	(b) Address (number and street) 8770 SUNSET DRIVE #355									
	(c) City, State, and ZIP Code									
	MIAMI				FL	33173				
8.	I hereby authorize the following nar candidacy.  NOTE: This designation should be for an arrangement of the following narrangement of the following narrange			,	. 0	mmittee, to rec	ceive and exp	end funds	on behalf of	my
CURBELO VICTORY COMMITTEE										
	(b) Address (number and street) 824 S. Milledge Ave									
	Ste 101									
	(c) City, State, and ZIP Code									
	Athens				GA	30605				
	I certify that I have exa	mined this Stat	ement and to	the best of i	my knowledge a	and belief it is t	true, correct a	and compl	ete.	
Signature of Candidate						Date				•
IVI	Mr. CARLOS CURBELO [Electronically Filed]			12/18/201	5					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										

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	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is N candidacy.	NOT my principal campaign committee, to receive and expend funds o	on behalf of my
NOTE: This designation should be filed with the pri	ncipal campaign committee.	
(a) Name of Committee (in full)		_
Curbelo Victory Committee		
(b) Address (number and street) 824 S. Milledge Ave Ste 101		
(c) City, State and ZIP Code	0.4	
Athens	GA 30605	
	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is I candidacy.	NOT my principal campaign committee, to receive and expend funds of	on behalf of my
NOTE: This designation should be filed with the pri	incipal campaign committee.	
(a) Name of Committee (in full)		
Rise Project		
(b) Address (number and street) PO Box 2485		
(c) City, State and ZIP Code		
Springfield	VA 22152	
	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is I candidacy.	NOT my principal campaign committee, to receive and expend funds of	on behalf of my
NOTE: This designation should be filed with the pri	incipal campaign committee.	
(a) Name of Committee (in full)		
Patriot Day 1 2015		
(b) Address (number and street) 228 S Washington St		
(c) City, State and ZIP Code		
Δlevandria	VA 22314-5408	

FEC Form 2 (Rev. 02/2003)				Page 3 /
DESIGNATI	ION OF OTHER AUTHO			[ ADDITIONAL ]
I hereby authorize the following named committee, whi candidacy.	ich is NOT my principal campaign	committee, to	receive and expend funds	on behalf of my
NOTE:This designation should be filed with the	he principal campaign commi	ttee.		
(a) Name of Committee (in full)				
Southern Elephant Romp				
(b) Address (number and street) 824 S. Milledge Ave Ste 101				
(c) City, State and ZIP Code				
Athens		GA	30605	
DESIGNAT	TION OF OTHER AUTH (Including Joint Fundraising	_		[ ADDITIONAL ]
I hereby authorize the following named committee, wh candidacy.	nich is NOT my principal campaigr	n committee, to	receive and expend funds	s on behalf of my
NOTE:This designation should be filed with t	the principal campaign commi	ittee.		
(a) Name of Committee (in full)				
Curbelo Victory Committee				
(b) Address (number and street) 824 S. Milledge Ave Ste 101				
(c) City, State and ZIP Code				
Athens		GA	30605	
DESIGNAT	ION OF OTHER AUTH (Including Joint Fundraising			[ ADDITIONAL ]
I hereby authorize the following named committee, wh candidacy.	nich is NOT my principal campaigr	n committee, to	receive and expend funds	s on behalf of my
NOTE:This designation should be filed with t	the principal campaign commi	ittee.		
(a) Name of Committee (in full)				
Rise Project				
(b) Address (number and street) PO Box 2485				
(c) City, State and ZIP Code				
Springfield		VA	22152	

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	OF OTHER AUTHORIZED COMMITTEES luding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is N candidacy.	IOT my principal campaign committee, to receive and expend fund	s on behalf of my
NOTE:This designation should be filed with the prin	ncipal campaign committee.	
(a) Name of Committee (in full) Millennial GOP Victory Commit	tee	
(b) Address (number and street) 824 S Milledge Ave Ste 101		
(c) City, State and ZIP Code		
Athens	GA 30605	
	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is N candidacy.	NOT my principal campaign committee, to receive and expend fund	s on behalf of my
NOTE: This designation should be filed with the print	ncipal campaign committee.	
(a) Name of Committee (in full)		
Pioneer Project Wine Club		
(b) Address (number and street) 824 S Milledge Ave Ste 101		
(c) City, State and ZIP Code		
Athens	GA 30605	
	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is N candidacy.	NOT my principal campaign committee, to receive and expend fund	s on behalf of my
NOTE: This designation should be filed with the prin	ncipal campaign committee.	
(a) Name of Committee (in full)		
Patriot Day 1 2015		
(b) Address (number and street) 228 S Washington St		
(c) City, State and ZIP Code		
Alexandria	VA 22314-5408	

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			_	

#### [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) Southern Elephant Romp (b) Address (number and street) 824 S. Milledge Ave Ste 101 (c) City, State and ZIP Code Athens GΑ 30605 [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code

#### **DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

- (a) Name of Committee (in full)
- (b) Address (number and street)
- (c) City, State and ZIP Code